GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

UNSTARRED QUESTION NO:1477
ANSWERED ON:03.08.2005
NATIONAL ILLNESS FUND
Koya Dr. P. Pookunhi

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the details of the National Illness fund alongwith the date on which it was set up ;

(b) whether the financial assistance from the fund is provided to patients all over the country ;

(c) if so, the norms fixed for grant of such assistance ; and

(d) the total amount released for the fund so far during the last three years, illness- wise and State-wise?

Answer

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH & FAMILY WELFARE (SMT. PANABAKA LAKSHMI)

(a, b and c) The details of National Illness Assistance Fund renamed Rashtriya Arogya Nidhi, including the date on which National Illness Assistance Fund/Rashtriya Arogya Nidhi was established, the extent of its implementation in the country are enclosed at Annexure `A` .

(d) Details are at Annexure `B`.

ANNEXURE-A

Annexure in reply to part (a, b and c) of Lok Sabha Unstarred Question No. 1477 for 3.8.2005

RASHTRIYA AROGYA NIDHI

1. Establishment of Rashtriya Arogya Nidhi

The Department related Parliamentary Standing Committee on Human Resource Development in its 31st Report on the functioning of the Central Government Hospitals under the Department of Health, had expressed concern about inadequate facilities for the treatment of poor patients for major illness. The committee felt that it was essential to explore all appropriate sources of funds to assist poor patients coming to AIIMS or other Central Govt. Hospitals for their treatment of specific life threatening illness. In view of the recommendations of the above Committee, it was decided to set up a National Illness Assistance Fund under the Department of Health, Ministry of Health & Family Welfare. The Committee on non-Plan Expenditure in its meeting held on 17th October 1996 approved the proposal for setting up of the fund. Accordingly the National Illness Assistance Fund was set up vide Resolution No. F-7-2/96-Fin-II dated 13/1/97 and was also registered under the Society Registration Act, 1860, as an autonomous Society. The name of National Illness Assistance Fund has now been changed as Rashtriya Arogya Nidhi (RAN) vide Resolution dated 8th April, 2003.

2. Admissibility under the scheme

The scheme provides for financial assistance to patients, living below poverty line who are suffering from major life threatening diseases, to receive medical treatment at any of the super speciality Hospitals/Institutes or other Government hospitals. The financial assistance to such patients is released in the form of `one-time grant`, to the Medical Supdt. of the Hospital in which the treatment is being received.

3.1 Establishment of State Arogya Nidhi (State Illness Assistance Fund)

All State Govts./UT Administrations have been advised vide Ministry of Health & Family Welfare letter dated 11/11/96 to set up an Illness Assistance Fund in their respective States/UTs. It has been decided that grant-in-aid from Central Government would be released to each of these States/UTs (with Legislature) where such Funds are set up. The Grant-in-aid to States/UTs would be to the extent of 50% of the contributions made by the State Govts./UTs to the State Fund/Society subject to a maximum of Rs. 5 crores to States with larger number and percentage of population below poverty line viz. Andhra Pradesh, Bihar, Madhya Pradesh, Karnataka, Maharashtra, Orissa, Rajasthan, Tamilnadu, Uttar Pradesh and West Bengal and Rs. 2 crores to other States/UTs. The State/UT level Funds could also receive contributions/donations from donors, as mentioned for RAN. The Illness Assistance Fund at the State/UT level would release financial assistance to patients living in their respective States/UT upto Rs. 1.5 lakhs in an individual case and forward all such cases to RAN, where the quantum of financial assistance is likely to exceed Rs. 1.5 lakhs.

3.2. The following States/UTs (with Legislature) have set up Illness Assistance Fund:- Karnataka, Madhya Pradesh, Tripura, Andhra Pradesh, Tamilnadu, Himachal Pradesh, Jammu & Kashmir, Maharastra, West Bengal, Kerala, Mizoram, Rajasthan, Goa, Gujarat, Sikkim, Bihar, Jharkhand, Chhattisgarh, Uttranchal, the NCT of Delhi and Pondicherry.

3.3 As per recent decision taken by HFM, all applicants receiving treatment in Delhi Hospitals would be eligible for receiving grants of Rashtriya Arogya Nidhi.

3.4 The following States/UTs have not yet set up the States Illness Assistance Fund in spite of repeated reminders.

1. Assam

2. Haryana

3. Manipur

4. Arunachal Pradesh

5. Meghalaya
6. Orissa

7 Punjab

8. U.P.

9. Nagaland

4. Managing Committee of Rashtriya Arogya Nidhi

Rashtriya Arogya Nidhi is managed by a Management Committee, consisting of the following members:-

1. Health Minister - Chairman

2. Secretary (Health/Min. of Health & FW) - Member

3. DGHS - Member

4. Financial Advisor, M/o Health & F.W. - Member Secretary

5. C.C.A., M/o Health & F.W. - Treasurer

There is also a provision of two non-official members to be co-opted from amongst the prominent donors to the fund.

5. Technical Committee of Rashtriya Arogya Nidhi

There is a Technical Committee to advise the Managing Committee on technical matters, such as nature of illness to be covered for assistance under the Scheme and other ancillary issues.

The Technical Committee comprises of the following:-

1. DGHS

2. Financial Advisor

3. Medical Superintendent, Dr. RML Hospital

4. HOD, Cardiology, AIIMS, New Delhi.

6. UTs. Without legislature

It has also been provided in the scheme that Union Territories (which do not have a legislature) will be sanctioned a budget outlay out of the NIAF, as and when the UT administration have set up an Illness Assistance Society/Committee. It was decided in the first meeting of the Managing Committee held on 21-10-98 that each UT will be sanctioned a budget outlay of Rs. 50 lakhs. Accordingly the following UTs have been sanctioned a budget outlay of Rs.50 Lakhs each, during the year1998-99.

1. Lakshdweep

2. Daman & Diu

3. Dadra & Nagar Haveli

4. Andaman & Nicobar Islands

5. Chandigarh

An illustrative list of categories of treatment to be provided from the fund is given in the Annexure -1`.

Annexure - 1

An illustrative list of categories of treatment to be provided from the fund is as follows : (This list could be modified by the Technical Committee):

1. Cardiology & Cardiac Surgery

Pacemakers disposable for interventional procedure including TMT, Echocardiography Coronary Angiography, Angioplasty Aheretomy, Heatsurgery for Congenital and Acquired conditions including C.A.B.G., Vascular Surgery stents and Cardiac Transplantation, etc.

2. Cancer

Radiation treatment of all kinds. Anti-Cancer Chemotherapy

3. Urology/Nephrology

Dialysis alongwith consumable goods (coils and dialysis solution etc.). Vascular shunts for Dialysis, P.C.N. & P.C.N.L. Kits, Lithotripsy (for stones)-disposable and stents for endoscopic surgical procedure in Urology and Gastroenterology, Renal & Hepatee transplantation.

4. Orthopaedics

Artificial prosthesis for limbs, implants and total hip and knee replacement external fixaters, AO implants used in the treatment of bone disease and fractures.

5. Miscellaneous

Intra-ocular lens implants, hearing aids and shunts for hydrocephalus.

6. Investigations

Ultra-sound, Doppler shidres, Radiooneulcolide scans, CT scan, Mammography, Angiography for all organs, M.R.I., E.E.G., EM.G., Urodynamic studies.

7. Drugs

Immuno-supressive durg, Anti TB drugs, Anti D, Anti Haemophilie globulin, Erythropoiten, Blood & Blood products/Plasma for patients of burn.

8. Other major illness considered appropriate for assistance by Medical Superintendent/Committee of Doctors could be added to the List.

ANNEXURE-B

Annexure in reply to part (d) of Lok Sabha Unstarred Question No. 1477 for 3.8.2005

Year	Total amount released (Rupees in lakhs)
2002-03	437.05
2003-04	564.54
2004-05	739.72

1. The Government of India releases assistance to States/UTs as Grant-in-aid who are expected to utilise the fund for treatment of patients in accordance with the guidelines of Rashtriya Arogya Nidhi.

2. The expenditure incurred is not maintained illness-wise.